

9. *Action of Iodine and Mercury.*—According to WREDEN, mercurial solutions act on iodized persons, and iodine solutions on mercurialized patients twice or three times as quickly, whether used externally or internally, as when these medicines are given separately. He believes that this depends on the formation of biniodide of mercury in the tissues of the body. If a portion of the skin be rubbed with mercurial ointment, and carefully washed after a few days, the inunction of iodine ointment produces the same symptoms of inflammation as arise from the inunction of biniodide of mercury. If a solution of corrosive sublimate (one or two grains in an ounce of distilled water) be dropped into the ear, no inflammation is produced, even though the application be repeated for several days; but it appears if, even after most careful cleansing, a solution of iodide of potassium (five grains to the ounce) be dropped in. If mercury have not been used, a solution of twenty or thirty grains of iodide of potassium is easily borne. Wreden has observed that, in patients who bore painting with iodine well, the skin, under the use of mercurial treatment by inunction, and even under the use of Zittman's decoction, became exceedingly sensitive to iodine. He also remarks that the internal use of iodide of potassium by patients subjected to an energetic course of mercurial inunction, produces more or less gastro-intestinal irritation, which is not the case in the same persons when even much larger doses of the iodide are given.—*Brit. Med. Journ.*, April 10, 1875, from *Med. Neuigkeiten*, 1874.

10. *Bromide of Lithium.*—Dr. ROUBAUD communicated (April 13) to the Academy of Medicine the following conclusion derived from his investigations regarding this medicine.

1. That the bromide of lithium has a double action.
2. That it possesses in a high degree the acknowledged lithontriptic powers of the salts of lithia.
3. That it acts more energetically than other bromides on the reflex sensibility without unfavourably acting on the heart like the bromide of potassium.
4. That consequently it holds the first rank among antilithic and sedative medicaments, and that it is especially valuable in the disturbance of the uric diatheses accompanied by pain and in the neuroses which are so often complicated with the presence of uric acid.—*Gazette Hebdom.*, April 16, 1875.

11. *Action of Iodide of Potassium in the Human Organism.*—Prof. BINZ of Bonn believes that iodide of potassium undergoes the following changes when taken internally. In a healthy stomach, a part is changed by the hydrochloric acid into hydriodic acid ($KI + HCl = KCl + HI$); another portion is acted on by the chloride of sodium, so that iodide of sodium is formed; and, if the dose be large enough, a part remains unaltered. All the three combinations quickly pass into the circulation. The hydriodic acid here meets with soda, and forms iodide of sodium; but the alkaline combinations of iodine are again acted on in the tissue by carbonic and other acids, and iodine is set free. This free iodine has the property of combining with certain albuminous bodies; and in this, Binz believes, lies the explanation of the therapeutic action of the preparations of iodine.—*Brit. Med. Journ.*, April 3, 1875.

12. *Chloral and Bromide of Potassium in Enema, for Diseases of Women.*—Dr. G. DE G. GRIFFITH recommends (*Brit. Med. Journ.*, May 8, 1875) the administration of chloral and bromide of potassium by enema in diseases of women as the best, since it does not nauseate, or give that unpleasant taste in the mouth which remains long with some patients, nor does it occasion the burning in the mouth, throat, and stomach, of which many patients complain, a sensation which may be prevented in the rectum by beating up the drug with a raw egg, or even two raw eggs, a little warm milk being added to further the solution. One great advantage is that the gastric nerves are not affected, as they are when the medicine is taken by the mouth; in which latter case they seem completely deadened, or, as it were, narcotized, a result that tends to impair the appetite.

He relates a case of violent puerperal mania in which, after quieting the patient with chloroform, he gave nutrient injections, to which he added bromide potassium one drachm, and half a drachm of chloral, with the best effects.

Dr. G. says that he has since used the chloral in half drachm doses, with a lady suffering the agonies of gall-stones, and in whom the stomach was so constantly irritable that no medicine could be retained; chloroform inhalation to narcotism, morphia by subcutaneous injection, and every conceivable remedy, had been tried to allay pain, and procure rest and sleep, but had all failed. In ten to fifteen minutes after the rectal injection of chloral, pain was assuaged, and in half an hour sleep was procured. I have in this manner also used it when menstrual pain and sickness could perhaps have been relieved in no other way; also in cases of uterine and ovarian irritation, where pain, such as we have in those affections, varied from the mildest to the severest states. In irritable rectum, also, I have found it most efficacious, and have just commenced to use it as a vaginal suppository. In uterine, ovarian, and rectal cases, it is an especially valuable agent, inasmuch as it is brought into immediate contact with the affected nerves, and acts upon them directly, deadening any hyperæsthetic conditions, and relieving pain.

13. *Sulphate of Chinchonidia*.—The British Government having ordered that the therapeutic value of this drug should be tried, Surgeon-Major GEORGE Y. HUNTER reports (*Lancet*, May 15, 1875) the results of his trials with it in the hospitals of the House of Correction and the County Gaol of Bombay. "The drug," he states, "was employed internally (*per viam naturalem*) for malarious fever, in doses of from five to ten grains, as well as hypodermically in a solution containing the following proportions: Sulphate of chinchonidia, five grains; dilute sulphuric acid, five minims; water, ten minims.

"From September, 1874, to February, 1875—a period of nearly six months, the term fixed upon for the experiment—I treated fifty-five cases of fever, chiefly intermittent of a mild form, due to sudden changes of weather, exposure to cold, privation, etc., or to indiscretions in diet. In the majority of these cases three days (equivalent to a consumption of ninety grains of the alkaloid at ten grains thrice daily) sufficed to effect a cure, or, perhaps I ought more correctly to say, to see an end of the slight attack. In some instances of a severer type (in men who came from malarious districts, for example) the chinchonidia completely failed to check the fever, and quinia had to be resorted to. In one bad case of remittent fever, which I regret to say ended fatally, chinchonidia was tried for two days, and discontinued on account of its proving ineffectual, thus strengthening my impression that it is worse than useless to depend upon this drug in severe fever set up by the poison of malaria. In a few cases its subcutaneous injection appeared to be of service, and I observed that no troublesome inflammation at the point of insertion followed its use.

"I may mention that in nearly every case in which chinchonidia was administered, headache, almost amounting to semi-congestion of the brain, resulted, which accords with the experience of some who tested the therapeutic value of this alkaloid on a former occasion. To obviate the symptom just alluded to, it was the practice in my hospitals to combine one grain of opium with ten of the chinchonidia. Sickness of stomach was also a frequent symptom, more often than it was noticed from quinia, which latter is undoubtedly a cholagogue, whereas one of the effects of chinchonidia is to lock up the secretions.

"I am of opinion that in some cases of a mild form of fever, for which ninety grains of chinchonidia were given, two or three grains of quinia twice or thrice daily for the same time would have stopped the fever. Perhaps it would be a fair representation of the case to say that ten grains of chinchonidia would be required to produce the same effect as three grains of quinia given in mild cases, and even then I am not sure that it would not be necessary to continue the treatment by its former longer.

"I think the drug for its therapeutic value might be classed with quinoidia, liquor quiniæ amorph., chirettine, bebeerine, etc., and their effects as antiperiodics is doubtful. Certainly chinchonidia cannot be ranked as an antiperiodic with quinia, and is not a specific for fever in the sense that remedy is. It